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| NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES | | Docket Number (Optional) 0480/001216 | |
| <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">In re Application of Rosenberg et al.</div> <div style="display: flex; justify-content: space-between; border: 1px solid black; padding: 5px; margin-bottom: 5px;"> <div>Application Number 09/787,079</div> <div>Filed 03/07/2001</div> </div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">For Method and device for producing tablets</div> <div style="display: flex; justify-content: space-between; border: 1px solid black; padding: 5px;"> <div>Art Unit 1791</div> <div>Examiner Huson</div> </div> | | | |
| <p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p> <p>The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ <u>540.00</u></p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input checked="" type="checkbox"/> Payment by credit card.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any deficiency, or credit any overpayment to Deposit Account No. <u>14-1437</u>.</p> <p><input type="checkbox"/> Applicants hereby petition for a <u>2</u> month extension of time under 37 C.F.R. §1.136.</p> <p><input checked="" type="checkbox"/> The requisite fee of <u>\$ 490.00</u> is paid by credit card.</p> <p>I am the</p> <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 60%;"> <p><input type="checkbox"/> applicant /inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>53,152</u></p> <p><input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____</p> </div> <div style="width: 35%; text-align: center;"> <p><u>/S. Peter Konzell/</u> Signature</p> <p><u>S. Peter Konzell</u> Typed or printed name</p> <p><u>202-659-0100</u> Telephone number</p> <p><u>December 29, 2008</u> Date</p> </div> </div> <p><small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</small></p> | | | |
| <input type="checkbox"/> *Total of _____ forms are submitted. | | | |